

APPLICATION FOR DEDUCTION FROM ASSESSED VALUATION New Research and Development Equipment in Economic Revitalization Area

State Form 49864 (R2 / 2-03)

Prescribed by the Department of Local Government Finance

The records in this series are CONFIDENTIAL according to IC 6-1.1-35.9

FORM 322 ERA/PPR&DE

INSTRUCTIONS:

- 1. This form is to be filed with the Auditor of the county in which "New Research and Development Equipment" is located (IC 6-1.1-12.1).
- 2. This form is to be filed between March 1 and May 15 of **each** year, unless a filing extension under IC 6-1.1-3.7 has been granted. A person who obtains a filing extension must file the form between March 1 and the extended due date of **each** year.
- 3. A deduction application must be filed in the year the new research and development equipment is installed and in **each** of the immediately succeeding years to obtain the full tax abatement which is available for each new layer of investment.
- 4. Attach copies of the current year and immediately preceding year BUSINESS TANGIBLE PERSONAL PROPERTY ASSESSMENT RETURN (Form 103).
- 5. A copy of the **STATEMENT OF BENEFITS** (Form SB-1) signed by the designating body **must** be attached to this application.
- 6. Form CF-1 **MUST** be filed with this application and the designating body showing compliance for all STATEMENT OF BENEFITS approved after June 30, 1991. (IC 6-1.1-12.1-5.6)
- 7. A copy of the resolution must be attached to this application.
- 8. Please see IC 6-1.1-12.1 and 50 IAC 4.2-13 for further information.
- 9. Property claimed for this deduction may not be claimed for any other deductions. IC 6-1.1-12.1-6.

| SECTION 1 | TAXPAYER INFORMATION | |
|--|--|---|
| Name of taxpayer | | |
| Full address (street and number, city, state and Z | IP code) | |
| County | Township | Taxing district |
| Name of contact person | | Telephone number |
| | | |
| | ONOMIC REVITALIZATION AREA DESIGNATION APP ty Auditor, pursuant to IC 6-1.1-12.1, for a deducent Equipment" effective March 1, 20 | |
| Name of body designating the economic revitaliza | ation area | Resolution number |
| Date designation approved (month, day, year) | Date designation will terminate (month, day, year) | Does resolution limit dollar amount of deduction? ☐ Yes ☐ No |
| Description of equipment (use additional sheets in | f necessary) | Date installed (month, day, year) |
| | | Cost |
| | | \$ |
| | | |
| | | |
| | | |

| | CLUDE ELIGIBLE EQUIPMENT INSTALLI DATE AND THE CURRENT ASSESSME | | |
|--|--|----------------------|----|
| QUALIFIED CURRENT YEAR ACQUISITIONS | Cost Claimed | True Tax Value (TTV) | |
| A. POOL NO. 1, Line 13 and 14 | \$ | \$ | |
| B. POOL NO. 2, Line 19 and 20 | | | |
| C. POOL NO. 3, Line 28 and 29 | | | |
| D. POOL NO. 4, Line 41 and 42 | | | |
| 2. TOTAL POOL TRUE TAX VALUE (TTV) (add A through D) | | | \$ |
| 3. OTHER (TTV OF CURRENT YEAR "SPECIAL TOOLING") | | \$ | |
| 4. TOTAL TRUE TAX VALUE (TTV) (Line 2 plus Line 3) | | | \$ |
| 5. ASSESSED VALUE AT 100% TTV OF LINE 4 | | | \$ |
| 6. CURRENT YEAR TRUE TAX VALUE (TTV) (Line 66 Schedule | A, minus Line 59 Schedule A) | \$ | |
| 7. ASSESSED VALUE OF CURRENT YEAR (100% of Line 6) | | | \$ |
| 8. PRIOR YEAR TRUE TAX VALUE (TTV) (Line 64 Schedule A m | inus Line 57 Schedule A) | \$ | |
| 9. ASSESSED VALUE OF PRIOR YEAR (100% of Line 8) | | | \$ |
| 10. LIMIT ON AMOUNT OF ABATEMENT (Line 5 minus Line 9) | | \$ | |
| 11. LIMIT ON AMOUNT OF ABATEMENT STATED IN RESOLUTION | N (if applicable) | \$ | |
| 12. AMOUNT OF DEDUCTION CLAIMED (lesser of Line 5, 10 or 1 | <u></u> | | \$ |

| SECTION 4 | | | SUMMARY OF CLAIMS | | prior years approved claims adjusted plus current years claim) | d claims adjust | ed plus current | ears claim) | | | |
|----------------------------|-----------------|-----|-------------------|------------------|--|-------------------|-----------------|-------------|--------|--------|--------|
| | CURRENT | 20 | 20 | 20 | 10 rear A | 20 Tear Abatement | 20 | 20 | 20 | 20 | TOTALS |
| Assessed Value Approved | | | | | | | | | | | |
| x Abatement Percent | 100% | %06 | %08 | %02 | %09 | %09 | 40% | 30% | 70% | 10% | |
| Amount Claimed | | | | | | | | | | | |
| | | | | ۸6 | 9 Year Abatement | | | | | | |
| | CURRENT YEAR | 20 | 20 | 20 | 20 | 20 | 20 | 20 | 20 | TOTALS | |
| Assessed Value Approved | | | | | | | | | | | |
| x Abatement Percent | 100% | %88 | %22 | %99 | %55 | 44% | 33% | 22% | 11% | | |
| Amount Claimed | | | | | | | | | | | |
| | | | | 8 Year Aba | Abatement | | | | | | |
| | CURRENT YEAR | 20 | 20 | 20 | 20 | 20 | 20 | 20 | TOTALS | | |
| Assessed Value Approved | | | | | | | | | | | |
| x Abatement Percent | 100% | %88 | 75% | 93% | %09 | 38% | 25% | 13% | | | |
| Amount Claimed | | | | | | | | | | | |
| | | | ٧ | 7 Year Abatement | | | | | | | |
| | CURRENT YEAR | 20 | 20 | 20 | 20 | 20 | 20 | TOTALS | | | |
| Assessed Value Approved | | | | | | | | | | | |
| x Abatement Percent | 100% | 85% | 71% | 21% | 43% | 29% | 14% | | | | |
| Amount Claimed | | | | | | | | | | | |
| | | | 6 Year Abatement | tement | | | | | | | |
| | CURRENT YEAR | 20 | 20 | 20 | 20 | 20 | TOTALS | | | | |
| Assessed Value Approved | | | | | | | | | | | |
| x Abatement Percent | 100% | 85% | %99 | 20% | 34% | 25% | | | | | |
| Amount Claimed | | | | | | | | | | | |

| | | 5) | 5 Year Abatement | | | |
|----------------------------|------------------|------------------|------------------|--------|--------|--------|
| | CURRENT YEAR | 20 | 20 | 20 | 20 | TOTALS |
| Assessed Value Approved | | | | | | |
| x Abatement Percent | %001 | %08 | %09 | 40% | 20% | |
| Amount Claimed | | | | | | |
| | | 4 Year Abatement | tement | | | |
| | CURRENT YEAR | 20 | 20 | 20 | TOTALS | |
| Assessed Value Approved | | | | | | |
| x Abatement Percent | 100% | % <u>5</u> 2 | %09 | 25% | | |
| Amount Claimed | | | | | | |
| | 3) | 3 Year Abatement | | | | |
| | CURRENT YEAR | 20 | | TOTALS | | |
| Assessed Value Approved | | | | | | |
| x Abatement Percent | 100% | 66 % | 33% | | | |
| Amount Claimed | | | | | | |
| | 2 Year Abatement | tement | | | | |
| | CURRENT YEAR | 20 | TOTALS | | | |
| Assessed Value Approved | | | | | | |
| x Abatement Percent | %001 | %09 | | | | |
| Amount Claimed | | | | | | |
| 7. | 1 Year Abatement | | | | | |
| | CURRENT YEAR | TOTALS | | | | |
| Assessed Value Approved | | | | | | |
| x Abatement Percent | 100% | | | | | |
| Amount Claimed | | | | | | |

| | USE OF EQUIPMENT CLAIMED | | |
|--|---|-------|------------|
| Is any of the equipment claimed being used to dispose of hazardous waste by converting it into a useful product? | rardous waste by converting | □ Yes | □ Yes □ No |
| If Yes, has the taxpayer been convicted of a violation under IC 13-7-13-3 or IC 13-7-13-4; or subject to an order or a consent decree for property located in Indiana? | 2 13-7-13-3 or IC 13-7-13-4; d in Indiana? | □ Yes | □ Yes □ No |

| | | D. |
|--------------------|---|----------------------|
| | | Date signed |
| TURE | n are true and correct. | Title |
| TAXPAYER SIGNATURE | hereby certify that the representations on this application are true and correct. | |
| SECTION 6 | I hereby certify that the re | Authorized signature |

| SECTION 7 | AUDITOR SIGNATURE | |
|-----------------------------|-------------------|------|
| Date certification filed | | |
| Signature of County Auditor | Date signed | gned |
| | | |

Send duplicate copy to the Department of Local Government Finance within ten (10) days of receipt.